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Related Trust Policies (to be	04061 Risk management policy and procedures
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,	09100 Incident policy
	08092 Mandatory Training Policy
	09062 Mandatory training policy for maternity services
	08063 Being open and duty of candour policy
	08070 Supporting staff involved in a traumatic incident, complaint or claim
	including potential never events
	04066 Medical equipment policy: safe use of medical equipment
	17020 Slips, trips and falls policy (non-patient)
	07009 Adult in-patient falls prevention and safe use of bedrails
	10120 Dignity in care policy
	11042 Adult patient transfer policy
	09030 Health and safety policy
	05012 Display screen equipment policy

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and 4. Amendment of ward names at points 7.8,	
9.2.1, appendix 3, 5 and 6.	

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1.0 Introduction

- 1.1 Mid Essex Trust recognises that moving and handling is an unavoidable part of the provision of healthcare. In order to ensure the safety and wellbeing of our staff and to provide high quality healthcare it is essential that our staff are adequately trained and assessed in the relevant tasks. The Mid Essex Trust promotes a minimal or where possible no lifting policy in line with healthcare guidance and codes of best practice.
- 1.2 This policy outlines Mid Essex Trust's obligations and arrangements to ensure robust processes are in place for the management of risks associated with the moving and handling of people and objects.
- 1.3 This policy aims to ensure Mid Essex Trust statutory duties and obligations are upheld in accordance with the various statutory requirements and other recognised standards to which the Mid Essex Trust will apply in day-to-day activities.
- 1.4 This policy sets out the standards of best practice for the safe moving and handling of loads, in relation to both patient and non-patient handling to provide a minimum lifting policy.
- 1.5 It is Mid Essex Trust's intention to fulfil its duties to avoid all hazardous moving and handling operations 'so far as is reasonably practicable' and to make a suitable and sufficient risk assessment of any hazardous moving and handling operations that cannot be avoided, to reduce the risk of possible injury. This Moving and Handling Policy is a key element of the Health and Safety Management system of Mid Essex Trust.
- 1.6 It is Mid Essex Trust's intention to fulfil its duties to avoid all hazardous moving and handling operations 'so far as is reasonably practicable' and to make a suitable and sufficient risk assessment of any hazardous moving and handling operations that cannot be avoided, to reduce the risk of possible injury. This Moving and Handling Policy is a key element of the Health and Safety Management system of Mid Essex Trust.
- 1.7 Moving and Handling plans shall be undertaken on all patients on admission and reviewed where there is any change to their condition/needs throughout their stay, and every 7 days if no change. Assessments will be recorded and readily available to appropriate staff.
- 1.8 Patient assessments will focus on the mobility of that patient and their needs, the management of slips, trips and falls also reduces injury to staff when assisting the patient to mobilise.
- 1.9 Risk Assessments for the moving and handling of inanimate loads must be undertaken. These assessments are to be undertaken by the line manager, at least annually, written and available within the workplace. These assessments should be referred to when the staff attend local induction and when new assessments are introduced to any member of staff carrying out the task, and should form part of the environment risk assessment.

1.10 Data Protection Act 2018 (General Data Protection Regulation – GDPR) Legislation

The Mid Essex Trust has a duty under the DPA18 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed and documented. Reliance cannot be placed on 'Opt out', it must be Opt in. DPA18 is applicable to all staff; this includes those working as contractors and providers of services. For more information about your obligations under the DPA18 please see the 'information use framework policy', or contact the Information Governance Team.

2.0 Definitions of Manual Handling Operations

Manual Handling Operations	Transporting or supporting of a load by hand or bodily force, including lifting, putting down, pushing, pulling, carrying or moving, by hand or bodily force.
Minimal Lifting	To avoid moving and handling by reducing the risk to the lowest level possible. In exceptional or life threatening circumstance there may be no other alternative than to lift using manual handling techniques; however, the lift must be planned and a dynamic risk assessment undertaken, to ensure the activity is done as safely as possible
Inanimate loads	Moving a load by lifting, lowering, pushing, pulling, carrying or supporting by hand or bodily force i.e. pushing beds, trolleys and record trolleys, moving notes, holding X-ray plates, moving buckets of water, carrying cooking pots, setting down the tool box.
Bariatric	 The word bariatric arises from the Greek root 'baros', meaning large or heavy. 'Bariatrics' is the management of extreme obesity and its related diseases. Patients are considered 'bariatric' when they have one, or more, of the following factors: Their BMI is greater than 40 kg/m² and/or they weigh 40 kg above the ideal weight for their height (NICE, 2006) Their weight exceeds the working load limit (WLL) and dimensions of the available standard support surface such as a bed, chair, wheelchair, couch, trolley, or mattress. (Refer to Appendix 3 for Bariatric moving and handling procedure)
Dynamic risk assessment	The continuous assessment of risk in the rapidly changing circumstances of an operational incident, in order to identify hazards and controls (if any) and evaluate risk and where necessary, implement further control measures necessary to ensure an acceptable level of safety. At the earliest opportunity the dynamic risk assessment should be supported by a written risk assessment using the Mid Essex Trust's designated risk assessment form
Safe Working Load (SWL)	The maximum amount of weight equipment e.g. beds can support.
Musculoskeletal disorders (MSD)	Musculoskeletal disorders: covers any injury, damage or disorder of the joints or other tissues in the upper/lower limbs or the back.

Key Person	A member of staff who has completed a Manual Handling Key Workers course run by the Learning & Development (Moving & Handling) trainers approved by the Specialist Moving and Handling Advisor and has become the ward / department lead person for manual handling

3.0 Scope

- 3.1 The policy shall apply equally to all staff working within Mid Essex Trust, and should be adhered to by all permanent and temporary staff including those employed on a temporary, ad hoc, agency, and bank basis. Suitable assessments will be in place for all staff areas, with support from Health and Safety manager/ Manual Handling Team.
- 3.2 The policy will apply to students, or people on work experience and Volunteers whilst on Mid Essex Trust premises, or engaged on Mid Essex Trust business on other premises.

4.0 Roles and Responsibilities

4.1 Chief Executive

Maintains overall accountability for all matters relating to health and safety (inclusive of moving and handling safe arrangements) throughout Mid Essex Trust. In conjunction with Trust Board in Common will delegate responsibility for the implementation of safe Moving and Handling Practices in Mid Essex Trust throughout the management of the organisation.

4.2 Mid Essex Trust Board in Common will:

- Ensure appropriate structures are in place to enable Mid Essex Trust to fulfil its responsibilities and obligations with regards to the Manual Handling Operations Regulations 1992.
- Ensure appropriate structures and resources are in place to effectively implement this
 policy, committing to those financial, managerial, technological and educational
 resources necessary to adequately control identified risks from Manual Handling
 activities.
- Committing those financial, managerial, technological and educational resources necessary to adequately control identified risks from manual handling activities.

4.3 **The Health and Safety Management Group** will be responsible for:

- Receiving findings / monitoring moving and handling associated reports.
- Ensuring escalation of actions that cannot be resolved at HSMG Level.
- 4.4 **Medical Director** will ensure that the appropriate mechanisms are in place to address the risks associated with manual handling.

- 4.5 **Director of Nursing -** is responsible for ensuring investigations are initiated and remedial action implemented when hospital wide trends are identified.
- 4.6 **Directors of Estates and Facilities** are responsible for:
 - Ensuring that all non-patient lifting and handling equipment is adequately serviced, maintained and inspected in accordance with the Lifting Operations and Lifting Equipment Regulations.
 - Maintaining accurate and appropriate records of all inspection, maintenance and service
 of lifting and handling equipment, ensuring that they are available for inspection as
 required.
- 4.6.1 Ensuring that all personnel undertaking maintenance work on lifting equipment are trained, experienced and supervised appropriately achieve competency in the tasks that they are expected to undertake.
- 4.7 Clinical Directors, Associate Directors of Nursing, Matrons/Charge Nurses and Department Leads will ensure that employees undertake mandatory manual handling training as identified in Mid Essex Trust Training Needs Analysis and investigate any moving and handling incidents. In addition they will be responsible for:
 - Effective implementation of this policy within their areas of responsibility.
 - Ensure a manual handling key worker training programme is established in their area.
 - Reduce or eliminate all unnecessary moving and handling activities within their directorate.
 - Ensuring all moving and handling hazards and risks are identified, assessed, control
 measures implemented and monitored.
 - Take remedial actions required following any investigation;
 - Provision of appropriate and sufficient manual handling equipment and handling aids in accordance with the business planning process.
 - Records of risk assessments, corrective actions and review dates are maintained.
 - Provision and monitoring of moving and handling training to all staff.
 - All manual handling incidents are investigated appropriately.
 - Refer staff as and when necessary to Occupational Health for back-care and advice.
 - Appoint at least two dedicated key person for moving and handling in all areas.
 - Report unsafe procedures and techniques to the appropriate person.
 - Ensure root cause analysis are undertaken where moving and handling activity has impacted upon staff, patients or others within Mid Essex Trust wherever the risk matrix identifies a significant risk of 12 or above or when there is actual or potential serious harm.
 - Ensuring that each ward / department staff within their areas of responsibility can access this policy and for monitoring its application.

4.8 Ward and Department Managers

4.8.1 All Ward and Department Managers / leads will:

- Ensure the contents of this policy are brought to the attention of all people working within their Ward / Department.
- Ensure that suitable and sufficient Manual Handling Risk Assessments including 'Task' based assessments: are completed within their area of responsibility and will complete action plans, and review and maintained on a regular basis.
- Ensure where appropriate, all relevant moving and handling mobility risk assessments are completed and documented in the patient's Care plan / Action plan.
- Hold responsibility for ensuring that appropriate steps are taken to managing all moving and handling related hazards and risks within their sphere of responsibility.
- Provide staff with the necessary information, instruction and training relating to Manual Handling and provide adequate supervision to enable them to work safely.
- Ensure all staff members receive appropriate training and competency assessment in manual handling tasks that they are reasonably foreseeably likely to undertake.
- Investigate all Manual Handling incidents, occurring within their area of control or reported by their staff, in accordance with Mid Essex Trust's Incident reporting arrangements. The investigation will identify root causes and put measures in place to prevent a recurrence.
- Review risk assessments regularly and share the updates / changes with all staff
 undertaking the activities. Ensure that risk assessments and safe operating procedures
 are readily available for all staff to access, including any changes that have been made.
- Ensure that risk assessments are reviewed and updated accordingly following any incidents occurring.
- Notify the Health & Safety Team at the earliest opportunity, of any incident involving the failure of any lifting or moving and handling equipment.
- Identify and support staff willing to undertake the Key person role, advising the Specialist Moving and Handling Manager or Advisor(s).
- Ward Managers will ensure individual patient moving and handling assessments and action plans are completed at the earliest opportunity and within 24 hours of admission. Further ensuring that all staff are aware of the Moving and Handling Assessment Action Plan within the patient profile, before any such tasks are undertaken.
- Ensure equipment is regularly serviced maintained and in good working order.
- Records are kept of all Patient Handling Equipment on the ward / dept., where a need for more equipment is identified through the risk assessment process; decisions on appropriate equipment should be made in consultation with Mid Essex Trust Specialist Moving and Handling Advisor, Key workers, staff and others who may be involved as part of this process.
- Ensure slings and attachments are inspected before use with a record kept for all thorough checks, and used only with originally specified or approved lifting equipment. Where there is a need for alternative slings which are not the original manufacturers but are compatible with the equipment a risk assessment should be carried out documenting the relevant details of sling type, size, which loops are being used for the desired patient position and the safe working load, in conjunction with the Specialist Moving and Handling Advisor/Manager. This information will be documented in the manual handling action plan.

- Lifting equipment, including slings and attachments must be visually examined before use, all defects and faulty equipment shall be withdrawn from service immediately, labelled and reported to Dept. of Clinical Technology (Medical Physics) for prompt repair. All deficiencies in the provision of moving and handling equipment will be escalated to the Service Lead Manager / Associate Director in a timely manner.
- Ensure a dynamic risk assessment is conducted (and documented via DATIX) in situations where it is foreseeable that handling operations have to be carried out in an emergency situation, without the usual equipment.
- Ensure that members of staff do not carry out any moving and handling tasks without first receiving the appropriate training. New members of staff will be supported by a Key Worker or a competent member of staff, as identified in the Competency Framework for their local induction until they are deemed competent and safe to carry out tasks without supervision.

4.9 Specialist Moving and Handling (Manual Handling) Manager / Advisor(s)

- 4.9.1 The Specialist Moving and Handling Advisor is the Trust's centre of expertise with regard to all matters relating to moving and handling and shall give advice and support to managers, Key Persons and staff with regard to risk assessments, equipment and training.
- 4.9.2 The Specialist Moving and Handling Manager/Advisor will:
 - Regularly visit managers and staff throughout Mid Essex Trust to ensure they understand
 their responsibilities within the remit of Moving and Handling and shall give added support
 and advice as needed.
 - Provide advice about suitable training to managers and staff.
 - Provide advice about suitable training to mangers and staff including Learning & Development (Moving & Handling) trainers, Key Persons, Procurement and the Equipment Library.
 - Provide manual handling training for all staff within Mid Essex Trust and will assist with manual handling risk assessments where appropriate.
 - Provide a moving and handling report to HSMG every 2 months in line with group scheduled meetings
 - Support local managers with investigations into reported Manual Handling incidents and provide a report; and to assist managers with investigations in reported manual handling incidents.
 - Review the investigations relating to Moving and Handling Incidents, in order to provide advice to prevent recurrence and to disseminate learning across the Trust.
 - Communicate any changes to procedures to Managers and the M/H Trainer.
 - To monitor Moving and Handling incidents including identification of RIDDOR incidents, identifying trends and any areas of risk to the organisation, reporting to the Health and Safety Management Group and other meetings / groups as appropriate.
 - Advise staff and ward / department managers about appropriate equipment needs and provision.
 - Support the implementation of the Trust's Moving and Handling risk assessment procedure in accordance with current policy and assist managers, where necessary, to comply with their Moving and Handling duties.

- Oversee training given and ensure that the current course content is updated regularly in accordance with current evidence based best practice, from the HSE, National Back Exchange, Royal college of Nursing and Nursing Midwifery Council for training are implemented.
- Advise Mid Essex Trust on any significant changes in legislation and guidance relative to Manual Handling.
- Work with Mid Essex Trust Procurement team NHS Supplies, Medical Devices Group, Infection Control and other teams as appropriate to develop and update a list of standardised equipment for acquisition within the Trust. Where the need for non-standard equipment is identified, the Specialist Moving and Handling Advisor with conjunction with the manual handling manager will be consulted for advice prior to procurement.
- Carry out regular monitoring and audits of wards and departments, Moving and Handling related risks and risk assessments.
- Maintain their competency to perform their specialist role, to ensure continued professional development.
- Support the provision of training for key persons and other staff as required.
- 4.9.3 Manual Handling and Safety Manager along with the Manual Handling Advisor /Trainer will:
 - Provide best practice training on moving and handling equipment, both clinical and nonclinical and the development of Trust risk assessment processes in line with Mid Essex Trust Policy.
 - Maintain log of provision of advice and key interventions in relation to Moving and Handling practices.

4.10 Moving and Handling (Manual Handling) Trainer will:

- Support the implementation and promotion of this policy.
- Assist in undertaking and facilitating workplace assessments under the supervision of the Manual Handling Manager / Advisor.
- Develop and deliver of manual handling information, instruction and training.
- Ensure attendees training records covering theory and practice are recorded and maintained.
- Ensure available moving and handling equipment is appropriate and in safe working order prior to its use during training and all staff in their area.
- Understand and use manual handling equipment and current best practice techniques.
- Identify the need for additional moving and handling equipment to the Manual Handling Advisor in conjunction with manual handling Manager.
- Report unsafe practices or equipment to the line manager.
- Undertaking any specific risk assessments for areas that are not covered by the manual handling risk assessment templates.
- 4.11 **Health and Safety Manager** will assist with the implementation of the Policy working with the Manual Handling Safety Advisor to ensure proactive moving and handling management, providing specialist advice and annual reports to Mid Essex Trust Board.
- 4.12 **Learning and Development** will be responsible for the following:

- Ensure that relevant and appropriate moving and handling training (induction and refresher) for all staff in appropriate moving and handling techniques for patients and inanimate loads is provided across the Trust.
- Provide update training for all staff, supporting the Specialist Moving and Handling Advisor in providing Key Workers Moving and Handling training courses and annual updates at suitably equipped venues.
- Maintain records of training and competency assessment and all relevant documentation and teaching plans.
- Provide regular reports to the Health and Safety Management group, Service managers and other groups as required regarding training and competency status of all staff.
- Ensure that all training provided is planned in conjunction with and under the guidance of the Specialist Moving and Handling Manager/Advisor.
- Training and Development Co-ordinators will book staff on relevant training sessions and maintain training records for Trust staff.

4.13 Manual Handling Key Link Staff (Key Persons)

- Key Workers will be supported by their managers and given the necessary paid time away from their normal duties to carry out their role effectively.
- Key Link Staff (Key Persons), in conjunction with their ward / departmental managers shall:
- Implement the policy, provide a supportive role reinforcing safe practice and will act as a ward / department link person for manual handling risk assessment, training support and pro-active planning.
- Be fully supported by their manager / supervisor to assist in Moving and Handling Risk Assessments as required.
- Undertake assessment of staff competency, in moving and handling practiced techniques relevant to the workplace, at intervals not exceeding two years.
- Work closely with new and inexperienced employees through local induction in the
 workplace, Key link staff or a 'competent' member of staff will closely supervise, monitor
 and spend time with them in their first weeks of employment by giving them instruction
 and advice. To inform them about local protocols, safe systems of work, Moving and
 Handling tasks and equipment used in their work area, until they feel satisfied they are
 safe and competent, to work without supervision.
- Managers must liaise with Key link staff to ensure compliance with training and competence assessment requirements.
- Work with Mid Essex Trust Specialist Moving and Handling Manager or Advisor(s) in the audit and reviewing of risk assessments and the investigation of Moving and Handling related incidents.

4.14 All Staff will:

- Ensure they read and acknowledge understanding of the Trust's policies regarding moving and handling, local risk assessments and safe systems of work.
- Acknowledge and understand their responsibilities under Mid Essex Trust minimal moving and handling policy.
- Utilise all manual handling equipment provided, at the appropriate time and in the appropriate manner, in accordance with the Manual Handling Regulations.

- Must not undertake any moving and handling tasks unless they have undergone their induction and task specific training and assessment.
- Must not use or attempt to use any equipment that they have not received training and assessment or feel confident in the use of, but to report to their line manager, for immediate assistance and to arrange additional appropriate training.
- New staff will be supported by a Key Person(s) or a 'competent' member of staff, in their local induction (in the work area), to ensure they are safe and competent in their moving and handling practice.
- Must comply with the Trust's management strategy and Trust policy to ensure they follow safe systems of work, by following the correct techniques, procedures, and using the appropriate equipment. If equipment is not available seek advice from the Specialist Moving and Handling Advisor, Site Manager or Medical Equipment supplies equipment Library staff.
- Must take reasonable care they remain 'fit for work', the employee must report any illness
 or injury, which may make 'moving and handling' hazardous to themselves or others, to
 their immediate supervisor or line manager and for this information to be recorded within
 the Datix system.
- Attend and participate in all practical moving and handling training as detailed in Mid Essex Trust Strategy, relevant to their area of work. Failure to do so may result in the staff member being unable to work in the designated area or tasks until they have received the appropriate training and been assessed as competent.
- Attend appropriate training provided on moving and handling equipment;
- Approach all moving and handling tasks in accordance with the specific patient / task manual handling assessment. In emergency situations, carrying out an initial dynamic risk assessment.
- Ensure patient handling mobility assessments are carried out and documented in the patients Moving and Handling Action Plan, and to review on an on-going basis and document any significant changes in patients moving and handling requirements.
- Report any accident / incident / near miss relating to moving and handling, recording the incident via the Datix system.
- In the event of a staff member being referred to the Occupational Health Department in relation to harm arising from moving and handling activities or other musculoskeletal injury the staff member will attend the appointments and participate fully in the assessment process.
- Be aware of and use their designated key link manual handling person in the areas that have them.
- Inform their managers of any conditions affecting them personally that may affect their ability to undertake manual-handling operations safely (this includes health issues, mobility and/or pregnancy).
- Report faulty equipment to their line manager immediately.
- 4.15 **Bio Medical Engineering Department (BME)** will arrange for maintenance and repair of hoists and record the date on the relevant piece of equipment.
- 4.15.1 The Health and Safety Manager in conjunction with the manual handling Advisor will ensure all reported accidents as a result of defects in manual handling equipment are investigated.

- 4.16 Occupational Health Advisors (OHA's) risk assessment will identify the steps needed to reduce the risk of injury, the need for staff training and the need for equipment. Key Workers, Specialist Moving and Handling Advisor and / or Health and Safety representatives, may provide support in carrying out the risk assessments for their ward / department. Occupational Health Advisors shall:
 - Will assess staff for fitness for their role; this may include some recommendations regarding temporary or permanent adjustments. They will liaise with Manual Handling and Safety Manager if there is a need for assistance with risk assessments or reviews.
 - Support staff with work-related health problems and advise management on appropriate and reasonable work adjustments.
 - In conjunction with Specialist Moving and Handling Manager / Advisors, provide advice to managers and employees on working practices to minimise or alleviate health problems.
 - Liaise with relevant other professionals and advisors to develop and monitor suitable rehabilitation programmes tailored to the employee's needs.
 - Give advice to members of staff about the principles of back care and / or the care of musculoskeletal problems from which they may be suffering.
 - Work in close co-operation with safety advisors, human resources staff, health and safety representatives, trainers and managers to ensure a seamless and co-ordinated approach to the prevention of moving and handling work related ill health.
 - Notify the Safety Team, in a timely manner, of any incidents of occupational ill health related to, acute, chronic or degenerative, musculoskeletal injury or condition that may fall within the requirements for statutory reporting to the enforcement authorities.

4.17 Director of Strategy and Corporate Services

4.17.1 As the Executive Lead for Health and Safety, the Director of Strategy and Corporate Services will ensure that the Manual Handling and Safety Manager has appropriate resources to support the promotion of the Trust's safety culture associated with moving and handling.

5.0 Risk Assessment Process

- 5.1 Moving and Handling risk assessments (moving and handling plan) will be undertaken on all patients on admission and completed within 24 hours. This assessment will identify the patient specific needs and identify any required equipment. The wards maintain stocks of slings and slide sheets. If specialised equipment is required, this can be obtained from the Manual Handling Team. Equipment can be accessed out of hours.
- 5.2 Patient risk assessments must be reviewed where there is any change during the patient stay or every 7 days as a minimum. The assessment will be recorded and readily available to appropriate staff.
- 5.3 Where a patient transfers out of their ward area, the moving and handling plan and patient specific equipment in use should accompany them in accordance with the transfer policy.

- 5.4 Risk assessments for the moving and handling of inanimate loads must be undertaken in all areas. These assessments are to be undertaken by the line manager/senior staff, using Mid Essex Trust template and made available within the workplace in the red risk folder. Where there are risks, actions should be developed by the ward / department manager and recorded on the action plan of Mid Essex Trust moving and handling risk assessment pro forma. Implementation dates should be included and the manager must sign off when actions are completed.
- 5.5 Managers should seek advice from the Manual Handling Advisor in conjunction with the Manual Handling and Safety Manager as necessary.
- 5.6 Risk assessments should be reviewed annually as a minimum and in response to incidents or changes in working practice.
- 5.7 These assessments should be referred to when staff attend local induction and when new assessments are introduced to any member of staff carrying out the task
- 5.8 Department / load risk assessments should be copied to the Manual Handling and Safety Manager to facilitate organisational learning through reporting to the Health and Safety Manager and Health and Safety Management Group as appropriate.
- 5.9 Where a high or extreme risk may affect other areas of the Trust, the assessment will be brought to the attention of the Health and Safety Manager and be addressed by the Clinical Director / Head of Nursing and Midwifery/ Head of Department on their local Risk Assurance Framework ensuring regular review at directorate or departmental governance meetings. The risk will be raised at Health and Safety Management Group and where necessary monitored through the Health and Safety Risk Assurance Framework.

6.0 Training

- 6.1 Managers are responsible for ensuring their staff have access to and attend suitable and sufficient training. Training will be provided in accordance with Mid Essex Trust Training Needs Analysis (Mandatory Training Policy). The Law requires that staff receive appropriate Health and Safety training when:
 - They are newly appointed;
 - A new or changed system of work is introduced;
 - The member of staff moves internally to a new job. All staff must receive their training every 2 years, therefore training records must be checked to ensure suitable and sufficient training is received.
- 6.1.1 Additional updates can be obtained through e-learning systems or liaison with your Manual Handling link or the Manual Handling team wherever specific risks are identified.
- 6.2 The Manual handling training program consists of both theoretical and practical elements including:
 - Legislation;

- Manual Handling definition;
- Causes of injury (spinal awareness);
- Kinetics / ergonomics and principals of safe Manual Handling;
- Hazard and Incident Reporting;
- Manual Handling Risk Assessment (including Patient Handling Risk Assessment);
- Client /Load handling criteria;
- Choice and safe use of equipment;
- Communicating with patients and co-workers.
- 6.3 Where new equipment is introduced within wards/departments suitable training is to be arranged on site to ensure staff are confident and competent to use it. Records should to be kept of all training sessions whether classroom or department based. These records must be sent to the training and development department to be entered on the staff member's training record.
- 6.4 Clinical staff and technical support professions (such as porters, Therapy Service and Radiology) must ensure that they update their moving and handling training every 2 years by attending a practical session. Failure to review 2 yearly may result in attendance at an induction practical session in manual handling.
- Non-clinical staff (such as estates, hotel services personnel) and office staff must attend their updates every 2 years. Sessions may also be provided within the directorate by arrangement of the local line manager. These updates are available as an e-learning package. The link trainers within the soft FM are to ensure records of sessions are sent to the Manual Handling and Training Teams to add to the staff members Electronic Service Record.
- 6.6 All staff should review their training needs if there is a change to the use of equipment, change to equipment type or changes to previous systems of work.
- 6.7 The agreed techniques used for patients within Mid Essex Trust are in accordance with 'The Guide to Handling Patients', Editions 1 to 6. The practiced techniques on the equipment (hoists, profiling beds, slide sheets) used within Mid Essex Trust and demonstrated by the Manual Handling Safety Advisor, Moving and Handling Trainer and manual handling links adhere to these guidelines.

 (Refer to Appendix 2 identifies controversial techniques that should not be used.)
 - **NB.** Before assisting in any moving and handling tasks staff must have been shown the agreed techniques by a moving & handling trainer or the moving and handling advisor. All controversial moving and handling techniques as identified in the revised 6th Edition Guide to Handling Patients are to be discouraged and will not be taught within Mid Essex Trust(See Appendix 2 for the list of controversial techniques.)

7.0 Equipment

- 7.1 All manual handling equipment must be in good working order at all times, or a replacement found to enable staff to continue working safely.
- 7.2 Supply of full body slings for the majority of Mid Essex Trust is achieved via submission of order via wards and direct delivery. Areas where this arrangement does not exist are stocked by the Manual Handling (M/H) Team.
- 7.2.1 Full body slings are available in Small, Medium, Large, Extra Large and Extra, Extra Large. Should wards run low on slings or slide sheets adequate supplies are available in the M/H training room 24/7 365 days a year. The room can be accessed by porters at all times. Please note that wards must ensure they never run out of slings and put patients at risk by allocating the wrong size sling, which would breach the regulations. The slings used on the full body hoists are patient specific and must be disposed of in the clinical waste when no longer required.
- 7.2.2 These slings are not to go home with a patient as washing them will reduce the load capability of the material and the user will be at risk. Some Specialist slings are washable. The sling is to be allocated to a patient for their exclusive use during their stay.
- 7.2.3 The sling is then placed in a purple laundry bag; the personal laundry parcel service slip must be completed. The department is Manual Handling as all the slings are checked before they go back out in Mid Essex Trust to meet with legislation.
- 7.2.4 All wards and departments have a duty of care to ensure patients are allocated the correct size sling.
- 7.3 Slide Sheets are ordered centrally and delivered out by the manual handling team. The slide sheets are patient specific.
- 7.3.1 Equipment for sliding transfers (Patient Assisted Transfer (PAT) slide and at least 2 slide sheets) should be used for all patients requiring assistance, with a minimum of 3 staff to comply with best practice. For patients exceeding 20 stone refer to Bariatric protocols. Upper load limits of each hoist within Mid Essex Trust should be clearly identified, most hoists within Mid Essex Trust are suitable for transferring patients weighing up to 31stone (200kg). Departments should identify the location of the nearest suitable hoist and make arrangements in advance of any need for their use.
- 7.3.2 The arrangements must be recorded in writing and displayed in an accessible location for all staff that would need the information. The handling of patients over 127kgs (20 stone) may require specialised equipment (refer to Appendix 3 procedures for the manual handling of bariatric patients).
- 7.4 Hoists and slings a visual inspection should be made prior to use. A competent person must inspect the equipment every 6 months and it must be serviced yearly and records kept. The Safe Working Load (SWL) should be clearly marked on the hoist. This process is the

- responsibility of Estates and Facilities Department, as identified in the Trust's 'Medical devices policy'. Most of the full body slings used are patient specific disposable slings.
- 7.5 When considering the purchasing of any moving and handling equipment the Manager should contact the Manual Handling and Safety Manager/ Advisor to discuss the requirements to ensure standards for equipment are maintained within the Trust. Before deciding on which equipment to purchase it should be tested, and evaluated for effectiveness / suitability for the task, in a specific risk assessment.
- 7.6 Before purchasing contact the procurement department and Manual Handling and Safety Manager/Advisor for advice and guidance on companies/products.
- 7.7 Stretcher hoist attachments are located throughout Mid Essex Trust to assist with assisting patients that have fallen from the floor. These must be used where there is any indication of fracture or spinal injury. Scoop stretchers are also available with the equipment. Locations can be seen in Appendix 6.
- 7.8 There are 2 evacuation 'Hoverjack' systems, in maternity and the Manual Handling training room for use to slide people down the stairs in an emergency where the lifts cannot be used. Staff in both these areas and Porters are trained how to use these by the Manual Handling Team and updated as part of their mandatory training.

8.0 Incident / Accident Reporting

- 8.1 All staff have a duty to report an accident / incident associated with moving and handling by completing a Datix, and cooperate in any follow-up investigation in accordance with 09100 Incident policy. For management of patient falls, refer to 07009 Adult in-patient falls prevention and safe use of bedrails policy
- 8.2 Any late reports of incidents must be considered critically to ensure Mid Essex Trust is not being held liable for injuries taking place other than at work.
- 8.3 Injuries to staff resulting from any Moving and Handling / Lifting activity will be discussed by Occupational Health and Risk Management. The Manual Handling and Safety Manager will obtain quarterly statistics on manual handling injuries from Risk Event data. If the member of staff is absent from work for more than 7 days or fractures a bone, the Health and Safety Manager should be contacted immediately so that a report can be sent to RIDDOR (refer to the 09100 Incident policy for further details).
- 8.4 Referrals should be arranged by management directly with Occupational Health, who may seek further guidance and input from the manual handling or risk management teams.
- 8.5 Manual handling risks will be monitored through the Health and Safety Group.
 - **NB.** It is considered a manual handling injury when staff experience task related pain that does not resolve spontaneously within an hour of onset.

9.0 Monitoring Policy Compliance

9.1 The Manual Handling and Safety Manager with the support of the clinical audit team will audit compliance with the requirement to undertake appropriate moving and handling risk assessments annually as a minimum. Results of the audits will be submitted to the Health and Safety Group for scrutiny.

9.2 Patient-related Risk Assessments

9.2.1 As a minimum, completion of patient risk assessments will be audited on a representative sample of wards.

9.2.2 Key criteria:

- All patients will have a moving and handling risk assessment / plan commenced within 24 hours of admission;
- All risk assessments should be reviewed appropriately;
- Any equipment required should be available and where patient specific clearly marked with the patient's name.
- 9.2.3 The findings will be reported to the Health and Safety Group and to Directorate and department governance meetings. Actions will be developed to address any deficiencies and progress monitored at subsequent meetings.

9.3 Department Moving and Handling (load) Risk Assessments

- 9.3.1 Completion of department moving and handling assessments is monitored on an on-going basis by the M/H Advisor in conjunction with the M/H Manager. Compliance will be reported to Directorate and Department Governance meetings and to the Health and Safety Group meeting.
- 9.3.2 The Manual Handling Advisor in conjunction with the Manual Handling and Safety Manager will ensure that when moving and handling risk assessments are submitted they are reviewed to ensure the risk assessment is suitable and sufficient and that where risks have been identified, actions have been developed and implemented to address these.

10. Communication and Implementation

- 10.1 The policy will be published on the intranet and Mid Essex Trust website and notified to staff in staff newsletter.
- 10.2 The Manual Handling Advisor in conjunction with the Manual Handling and Safety Manager will email copies to each of the key link manual handling staff that will have responsibility to cascade and implement in their areas.
- 10.3 Matrons, Ward Sisters/Charge Nurses and Heads of Department are responsible for ensuring that each ward /department within their areas of responsibility has access to a copy of this policy.

11. Review

11.1 The Manual Handling Advisor in conjunction with the Manual Handling and Safety Manager will review the policy every 3 years or more frequently in light of any changes in legislation, local initiatives or technological improvements.

12. References

Health & Safety at Work etc Act 1974

Available at: http://www.legislation.gov.uk/ukpga/1974/37/contents

HSE Manual Handling Operations 1992: Manual Handling in the Health Service

Available at: http://www.hse.gov.uk/msd/backpain/employers/mhor.htm

National Back Exchange/Royal College of Nursing – 1st to 6th Editions Guide to Handling Patients

Available through the Warner Library:

Smith, Jacqui, 2011. The guide to the handling of people: a systems approach. 6th ed. National Back Pain Association. 9780953058211

National Back Pain Association, 1997. The guide to the handling of patients. 4th ed. National Back Pain Association 9780953058204

HSE Reporting of Injuries, Diseases or Dangerous Occurrences Regulations 1995 (RIDDOR)

Available at: https://www.hse.gov.uk/riddor

Appendix 1: Preliminary Equality Analysis

This assessment relates to: Moving and Handling / 04090

A ch	ange in a service to patients	A ch	ange to an existing policy	X	A change to the way staff work
A ne	ew policy		ething else ase give details)		
	Questions				Answers
1. \	What are you proposing to cha	nge?	Full Review		
	Why are you making this chang What will the change achieve?	•	3 year review		
	Who benefits from this chance of the chance	nge and	Patients and clinicians		
i F	s anyone likely to suffer any mpact as a result of this chang please record reasons here and date this assessment. If ye complete a full EIA.	ge? If no, sign and	No		
	a) Will you be undertak consultation as part of this cha b) If so, with whom?		Refer to pages 1 and 2		

Preliminary analysis completed by:

Name	Stella Smith	Job Title	Manual Handling and Safety Manager	Date	July 2019	
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Controversial Manual Handling Techniques

1 Definition

1.1 These are techniques that may have been trained to staff in the past and are now recognised as unsafe in certain circumstances. More appropriate techniques are provided at mandatory training sessions and through the key link trainers.

2. Staffing Actions

- 2.1 It should be noted that where these movements are used the patient and the staff or agency member could be put at risk; a valid risk assessment must be in place before these techniques are proposed for use. When these techniques are used without an assessment an incident form must be completed to address the training issues involved.
- 2.2 These movements are known through the following training titles:
 - **Drag Lift:** Any lift that involves moving the patient with the nurse's arms or hands under the patient's axilla.
 - Orthodox Lift: Lift with two nurses clasping their wrists under the patients back and thighs and moving the patient.
 - Two Swing Lift: Same as Orthodox lift but with nurses knees remaining on the bed.
 - **Through Arm**: Nurses behind patient with their arms clasped around the patients waist and folded arms and lifting the patient back.
 - Shoulder Lift (or Australian Lift): Patients is between two nurses and places their arms over the nurses back. Nurses move patient with their weight on nurse's shoulder.
 - Front Transfer (one nurse): Nurse lets patient put their arms around their neck and lifts patient into standing position.
 - **Bear Hug:** Patient and nurse hold onto each other around the waist area and nurse lift patient.



Procedure for the Safer Handling of Bariatric Patients

1. Introduction

- 1.1 United Kingdom Central Council Code of Profession Conduct states that "the nurse has a responsibility to identify all patients at risk" (UKCC 1993).
- 1.2 Bariatric refers to the field of medicine that focuses on the treatment and control of obesity and the disease associated with obesity (Mosby's Medical, Nursing and Allied Health dictionary, 5th Edition, 1998)
- 1.3 All requisitions to purchase manual handling equipment will be authorised by accredited staff to ensure fitness for purpose and best value for money.

2 Scope

2.1 All Patients who are known or assessed as being in excess of 127kgs (20 stone) will be classed as extremely heavy/bariatric and subject to this protocol.

3 Aim

3.1 The purpose of the procedures is to minimise the risk of injury to staff, carers and patients plus to ensure the patient is moved in as comfortable and dignified manner as is reasonably practicable.

4 Referrals

4.1 The referrer should inform the Manual Handling Advisor in conjunction with the Manual Handling & Safety Manager and any other members of the Multi-Disciplinary Team of the patient as they enter the system. This protocol can then be initiated to ensure that any specialised equipment can be sourced.

5 Elective Admissions

5.1 Pre-admissions clinics and Outpatients Department should inform the ward and Manual Handling & Safety Manager (Ext 4781), as soon as admission is confirmed, allowing a minimum of at least 72 hours' notice. This information should be cascaded to all the involved areas (Theatres, Physiotherapists etc.); this protocol can then be initiated to ensure that any specialized equipment required is available for use when the patient arrives for admission.

6 Emergency Admissions

- 6.1 This Protocol will be initiated by the first service aware of impending admission, i.e. ambulance service, by contacting A&E staff, nurse in charge. The appropriate staff should be contacted as soon as possible. Within the A&E Department minimal handling of the patient will help to reduce risk of injury to staff e.g. procedures come to the patient such as x-ray, phlebotomy etc.
- 6.2 The Manual Handling Team must be informed within 24 hours of ALL bariatric admissions by phone on extension 4781. No personal details are to be sent just a ward location to enable support is given in the safe moving and handling/risk assessment of the patient. Mid Essex Trust tissue viability team will also need to be informed.

7 Assessment Procedure

- 7.1 A patient manual handling assessment must be completed and should identify:
 - The accurate weight of the person it is however recognized that in certain situations e.g. violent / non-compliant patients may be difficult;
 - The person's mobility, co-operation, mental state and any communication difficulties;
 - All moving and handling that is required;
 - Handling equipment that is required;
 - The number of staff that will be required;
 - Techniques to be used;
 - Action to be taken in the event of a patient falling;
 - The manual handling assessment must accompany the patient at all times between care settings;
 - An appropriate professional should review the assessment regularly;
 - Discharge or home visits must be planned ahead with consideration of methods of access / egress and transport;
 - Information regarding weight and handling problems must be communicated to
 other staff involved in the care of the patient e.g. radiographers, theatre staff,
 porters etc. It is the responsibility of other departments to ensure they have
 knowledge of the Safe Working Load of any equipment required before
 transferring the patient e.g. scanner/operating tables.

8 Tissue Viability

8.1 Advice and guidance on the selection of an appropriate pressure relieving mattress / cushion can be obtained from the Tissue Viability Nurse Specialist or the manufacturing company's representatives.

9 Bariatric Equipment

9.1 There are weight limits and restrictions that are used to raise/lower and transport patients that should be displayed on each piece of equipment. Most equipment in

- general use have limits between 127kgs 200kgs (20 –31 Stone), therefore alternative pieces will be required if the patient is heavier.
- 9.2.1 Weighing large patients can be difficult and hazardous. The Manual Handling Department has scales which can be used with a hoist up to 200kgs (31.4 stone) Within Zone E (A204) there are 12 overhead gantry hoist systems capable of lifting 400kgs (62 stone). Staff must ensure they have the correct XL sling available through the requisition processes if not available in the ward. There are also 8 Linet Eleganza 3XC beds in the Medical High Dependency Unit capable of weighing up to 250kgs (39 stone). There is a weigh bridge in the burns theatre which for infection control purposes should only be used with permission in exceptional circumstances. The team will assist with this procedure. There are also 2 portable Liko Viking L/XL fitted with scales and with a Safe Working Load of 300Kgs (39/47 stone) held in ESS (250kgs) and Feering Ward (300kgs).

10 Beds and Trolley

- 10.1 The Linet Eleganza beds have a safe working load of 230kgs and 250kgs which is on a label at the foot of the bed.
- 10.2 There are two Bariatric Beds both able to take 408kgs (65 stones). These beds have alternating air mattresses with a Safe Working Load of 225kgs (45 stone). The mattresses have foam swabs that are used along the sides of the patient when the bed width is increased by use of the telescopic sides. On the rare occurrence a patient exceeds 225kgs a suitable mattress can be hired from 1st Call Mobility 01279 425648 or five mobility 0800 1932523. Where a bariatric bed has been used and full decontamination is required if normal cleaning processes do not seem sufficient 1st Call Mobility or five mobility will when contacted remove the bed and mattress to their decontamination unit. The cost of this operation is payable centrally by EBME. The bed cannot be returned to the bed store until it has been cleaned and labelled to meet the requirements of Infection Prevention.
- 10.3 The bariatric beds can be obtained through the Manual Handling team. Out of hours and at weekends these beds can be requested to the site team and Porters Team Leaders via Teletracking.
- 10.4 There is a bariatric trolley located in A201 Radiology. It is not to be removed without informing the site team or leaving a message email/voice mail to the Manual Handling Team.

11 Deceased Patient

11.1 Manual handling risk assessments should include a safe and dignified method of transfer to the mortuary. The SWL of the mortuary concealment trolley within Mid Essex Trust is 180Kg (28 Stone). This trolley is height adjustable. In some cases it is impossible to transport the deceased patient on the trolley to the mortuary. To facilitate a dignified removal there are 2 purpose made bed covers, which are used,

- when the side rails are elevated to cover the whole patient's bed. The covers are held in the Mortuary.
- 11.2 Funeral directors need to be informed of the weight of the deceased patient. It is the responsibility of the Mid Essex team to move and handle the deceased within the mortuary. Portering and the Manual Handling Advisor will assist where required. Some bodies are brought to the mortuary directly by funeral directors where death has occurred in the community requiring Coroners support. These patients are weighed on arrival by the mortuary team.
- 11.3 All staff have a statutory obligation to weigh the patient before using any lifting appliance (Manual Handling in the Health Services HSE 1998). Experience has shown that attempts to estimate a patient's weight can be out as much as 10% either way. An accurate weight gives further options to choose the correct bed, hoist, chair etc.

11.4 Managers need to be aware of the manual handling regulations. They have a responsibility from their employer to ensure that staff are not exposed to hazardous tasks including manual handling.

Where to access further information -

Trust Intranet / Moving and Handling

Team





Patient arrives at A&E/MEW Ascertain weight Scales up to 300kgs on 'Viking' hoist in Feering Ward Where patient is Standing scales are available in the Renal unit and outside unstable, clinical pre assessment DSU judgement must Weigh bridge in burns be made Scales to attach to the overhead system are held within the according to Manual Handling room patients needs. Bariatric bed in the bed store in Zone E (A204) Equipment **Beds in Trust Hire Equipment** 1st Call Mobility Up to 230 kgs Linet Eleganza 3 Profiling Beds 01279 425648 or Up to 408kgs Baros Beds (2) managed by the Manual Five mobility Handling Team 0800 1932523 Risk Assessment Risks Assess Transfer patient to bed with suitable ceiling track system Where a sliding transfer is required - minimum of 8 staff, PAT slide & sufficient slide sheets MUST be used. A RISK ASSESSMENT MUST BE DONE All staff to be aware of techniques & physically able to assist prior to transfer. No pregnant staff or those with existing injury to assist. Where possible ask the patients to move themselves. Assisting to mobilise patient Trust Held Equipment There are purpose built All the bariatric rooms have chairs to meet bariatric rooms within Zone E the needs of the client group. (A204). ALL patients needing 4 bariatric commodes are kept in the this equipment for safe manual handling department handling MUST be cared for Both the portering services and Manual Handling Department have wheelchairs within the building. with SWL of 320kgs (50st) Further guidance

Contacts

Moving and Handling Manager ext 4781 or #6555

Out of hours, Switchboard will contact MH Manager

2646 Health and Safety Adviser 6433



11 Bariatric Overhead Hoist System Locations			
A&E	Majors, Side Room 8		
A&E	Majors, Side Room 9		
A&E	Resus		
A&E	Resus		
Same Day Emergency Care (SDEC)	Side Room 2		
A 205	Side Room 2		
GHDU	Side Room 7		
Stroke Unit (A3.1 or A302)	Side Room 29		
Heybridge Ward (A303)	Side Room 29		
Rayne Ward (A304)	Side Room 31		
Terling Ward (A305)	Side Room 29		

These are the rooms in Mid Essex Trust with the capability to lift 400kgs (63 Stone) through the ceiling tracks.

Please make sure that bariatric patients are put in these rooms where clinically possible.

In the event of a portable hoist being required for this patient group the Liko Viking XL which is located in Feering Ward has a safe working load of 300kgs (47 stone)

Please do not use the wrong size/ weight limit sling.

Contact M/H Team on x4781 or #6555 2646.



Stretcher Hoist Attachment (Octo stretch) locations

For zones C, D and B	Manual Handling training room	On Low rise bed
For Zone E	Notley Ward	Main store room
For zone A2	AMU	AMUStore cupboard
For Zone A3	Rayne Ward	Store room left at end of the ward